

Please type a plus sign (+) inside this box → ☐

PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>Express Mail No.: EV 539558111</b>	<b>Attorney Docket No.</b> 64251-022CIP	<b>First Inventor:</b> Adolf Stender
<b><u>AMENDMENT TRANSMITTAL LETTER</u></b>  <b>Title:</b> <i>Material Made From a Polyurethane Gel</i>		<b>Serial No.</b> 10/656778
		<b>Filing Date</b> 09/05/2003
		<b>Examiner</b> Bissett, Melanie D.
		<b>Group Art Unit</b> 1711

**TO THE ASSISTANT COMMISSIONER FOR PATENTS:**

Transmitted herewith is an amendment in the above-identified application.

- ☒ Large Entity Status
- ☐ Small Entity status of this application has been established under 37 CFR 1.27

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED – PART II						SMALL ENTITY		OTHER THAN SMALL ENTITY	
		(Column 1)		(Column 2)	(Column 3)	RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA				
	Total (37 CFR 1.16(c))	23*	Minus	20	3	x \$25.00=	\$	x \$50.00=	\$150
	Independent (37 CFR 1.16(b))	*	Minus	** *	=	x \$100.00=	\$	x \$200.00=	\$
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					x \$180.00=		x \$360.00=	
						TOTAL ADDIT. FEE	\$	TOTAL ADDIT. FEE	\$

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

- ☒ Petition of Extension of Time.
- ☒ No additional fee is required for amendment.
- ☐ A check in the amount of \$ \_\_\_\_\_ is enclosed.
- ☒ The Commissioner has already been authorized to charge fees in this application to a Deposit Account. 08-3460.
- ☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 08-3460.  
I have enclosed a duplicate copy of this sheet.
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☒ Any patent application processing fees under 37 C.F.R. 1.17.

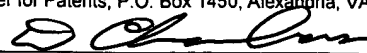
  
\_\_\_\_\_  
Signature

Date: May 13, 2005

Robert C. Haldiman, 45,437  
Husch & Eppenger, LLC  
190 Carondelet Plaza  
St. Louis, MO, 63105  
314-480-1500  
314-480-1505 FAX

Custom No.: 029493

F:\PEORIA\CHAMBERD\FORM\0181685.01

<p align="center"><b>Certificate of Express Mailing</b></p> <p>I hereby certify that this document and fee is being deposited with the United States Postal Service as "Express Mail" under 37 C.F.R. 1.10 Label No. <u>EV 539558111</u> on <u>5-13-05</u> and addressed to: MAIL STOP _____ Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 21313-1450.</p> <p>Signature: </p> <p>Type Name: <u>David Chambers</u></p>
--